				.Applio	cation Number	10/625	,845		
FEE TRANSMITTAL					Date		//24/2003		
					lamed Inventor	YOKO			
					iner Name		W. RIDER		
			- 050 4 02	Art U					
Applicant Claims small entity status. See 37 CFR 1.27					· iii	2626			
TOTAL AMOUNT OF PAYMENT (\$) 120					ey Docket No.	01-448			
METHOD OF PAYMENT (check all that apply)									
☐ Check ☐ None ☐ Other (please identify):									
Deposit Account Deposit Account Number: 50-1147 Deposit Account Name: Posz Law Group, PLC For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
Charge fee(s) indicated below									
Charge any additional fee(s) or underpayments of fee(s) Under 37 CFR 1.16 and 1.17 Credit any overpayments									
FEE CALCULATION									
1. BASIC FILING, SE		INATION F	ES						
FILING FEES SEARCH FEES EXAMINATION FEES									
Application Type		mall Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	<u>51</u> Fee (\$)	Fee (\$)	Fe	es Paid (\$)	
Application Type Utility	300	150	500	250	200	100	_	\$	
_	200	100	100	50	130	65			
Design	200	100	300	150	160	80			
Plant			500	250	600	300			
Reissue	300	150			000	0			
Provisional	160	80	0	0	U	U		Small Entity	
2. EACESS CLAIM FEES									
Fach daim over 20 or for Reissues, each daim over 20 and more than in the original patent 50 25									
Fach independent claim over 3 or for Reissues, each independent claim more than in the original patent 210 105									
Multiple dependent claims							370		
Total Claims	Extra Claim	_	<u>ee (\$)</u> _	Fee Paid (\$)		Fee (\$)	pendent Claims Fee Pa	2 id (\$)	
- 20 or HP = highest number of t		X							
Indep. Claims	Extra Claim		ee (\$)	Fee Paid (\$)					
-3 or		- x -							
HP = highest number of i	ndependent claims pai	d for, if greater t	nan 3						
3. APPLICATION SIZE FEE									
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$ (\$ for small entity)									
for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)									
Total Sheets									
4. OTHER FEE(S)									
Non-English Sp	ecification,	\$130 fee (n	o small entity di	scount)			-		
Other: Petition for Extension of Time, one month \$120									
SUBMITTED BY									
Signature	hoAi.	Nic		egistration No. ttorney/Agent)	36,880	7	•	703) 707-9110	
Name (Print/Type)	Print/Type) Cynthia K. Nicholson					ı	Date 8	August 2008	